様式第22の4号（第23条関係）

（サービス内容　　　　　　　　）

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| 事業者及びその事業所の名称 |  | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 計 |
|  | 契約支給量 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 支給量実績 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 支払額 |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | 契約支給量 |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| 支払額 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 決定支給量 | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 契約支給量合計 | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 支給量実績合計 | |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 支払額計 | |  |  |  |  |  |  |  |  |  |  |  |  |  |

居宅介護事業者別支払実績

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| 事業者及びその事業所の名称 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 月 | 計 |
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| 支払額計 |  |  |  |  |  |  |  |  |  |  |  |  |  |